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CONFIRMATION NO. 5164

| SERIAL NUMBER | FILING or 371(c) DATE RULE | CLASS | GROUP ART UNIT | ATTORNEY DOCKET NO. |
|---------------|----------------------------------|-------|----------------|---------------------|
| 10/628,521 | 07/28/2003 | 220 | 3781 | 17853 USA |

APPLICANTS

Wing-Kwong Keung, Perrysburg, OH;

**** CONTINUING DATA *******
**** FOREIGN APPLICATIONS *******
**** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ****

01/05/2004

| Foreign Priority claimed | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | <input type="checkbox"/> Met after Allowance | STATE OR COUNTRY | SHEETS DRAWINGS | TOTAL CLAIMS | INDEPENDENT CLAIMS |
|--------------------------------|---|--|------------------|-----------------|--------------|--------------------|
| 35 USC 119(a-d) conditions met | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | OH | 5 | 39 | 7 |

ADDRESS

OWENS-ILLINOIS, INC.
 ONE MICHAEL OWENS WAY, THREE O-I PLAZA
 PERRYSBURG, OH 43551-2999
 UNITED STATES

TITLE

Child-resistant flip-top dispensing closure and package

| | | |
|------------------------------------|---|--|
| FILING FEE RECEIVED 1678 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees |
| | | <input type="checkbox"/> 1.16 Fees (Filing) |
| | | <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) |
| | | <input type="checkbox"/> 1.18 Fees (Issue) |
| | | <input type="checkbox"/> Other _____ |
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